

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	SEQUENCE CIRCUIT DISPLAY METHOD OF INJECTION MOLDING MACHINE
Attorney Docket Number::	TANIZAWA1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
<b>Applicant Information</b>	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Seiji

Middle Name::  
Family Name:: TANIZAWA  
Name Suffix::  
City of Residence:: Aichi-ken  
State or Province of Residence::  
Country of Residence:: Japan  
Street of Mailing Address:: Meiki Seisakusho Nai, 2, Ohne, Kitasaki-  
cho, Ohbu-shi  
City of Mailing Address:: Aichi-ken  
State or Province of Mailing Address::  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 474  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Kazuyuki  
Middle Name::  
Family Name:: OSAWA  
Name Suffix::  
City of Residence:: Aichi-ken  
State or Province of Residence::  
Country of Residence:: Japan  
Street of Mailing Address:: Meiki Seisakusho Nai, 2, Ohne, Kitasaki-  
cho, Ohbu-shi  
City of Mailing Address:: Aichi-ken  
State or Province of Mailing Address::  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 474  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Japan  
Status:: Full Capacity  
Given Name:: Shoji  
Middle Name::

Family Name:: OKADO  
Name Suffix::  
City of Residence:: Aichi-ken  
State or Province of Residence::  
Country of Residence:: Japan  
Street of Mailing Address:: Meiki Seisakusho Nai, 2, Ohne, Kitasaki-  
cho, Ohbu-shi  
City of Mailing Address:: Aichi-ken  
State or Province of Mailing Address::  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 474  
**Correspondence Information**  
Correspondence Customer Number:: 001444  
**Representative Information**  
Representative Customer Number:: 001444  
**Domestic Priority Information**  
Application:: Continuity Type:: Parent Parent Filing  
Application:: Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
Japan	2003-62987	03/10/03	Yes

**Assignment Information**

Assignee Name:: Kabushiki Kaisha Meiki Seisakusho  
Street of Mailing Address:: 2, Ohne, Kitasaki-cho, Ohbu-shi  
City of Mailing Address:: Aichi-ken  
State or Province of Mailing Address::  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 474